

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER	
TOTAL CLAIMS			(Column 1)		(Column 2)			TYPE [FEE	OR 1 1	SMALL	
FOR STATE			NUMBER FILED		NUMBER EXTRA			RATE BASIC FEE			RATE BASIC FEE	740.00
					NUMBER EXTRA				370.00	OR		740.00
TOTAL CHARGEABLE CLAIMS			3 (minus 20=		* 4			X\$ 9=		OR	X\$18=	306 or
	EPENDENT CL			nus 3 =	2			X42=		OR	X84=	162
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT					+140=		OR	+280=	,
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			olumn 2	'	TOTAL		OR	TOTAL	12147
	С	LAIMS AS A	MENDED - PART II					,			OTHER	
	C 11 17 24 2 3 4 5 3 5 3 5 7 5 7 5 7 5 7 5 7 5 7 5 7 5 7	(Column 1)		(Column 2) '(Column 3)			٠.	SMALL		OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
L	FIRST PRESE	NTATION OF MI	J L TIPLE DEF	PENDEN	CLAIM		J	+140=			+280=	
								TOTAL		OR	TOTAL	
								ADDIT. FEE		OR	ADDIT. FEE	
		(Column 1)	1.00	(Colur		(Column 3)	7 .					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	i = i
	Independent	*	Minus	***		=] [X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM		J					
							L	+140=		OR	+280=	
							Þ	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)	Icano de la companya	(Colur		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	*	Minus	**	-	=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=-]	X42=			X84=	:
Ľ	FIRST PRESE	NTATION OF M	JLTIPLE DEF	ENDENT	CLAIM		J ├	/,12-		OR	7.0	
A Mill of the Add to t										OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		mber Previously Pa ober Previously Pai							ropriate box			